

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2000

Application or Docket Number

8988FF75

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

|                                  |              |                          |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS                     | 18           |                          |
| FOR                              | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 18 minus 20= | 0                        |
| INDEPENDENT CLAIMS               | 4 minus 3=   | 1                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |              | <input type="checkbox"/> |

SMALL ENTITY  
TYPE

OR OTHER THAN  
SMALL ENTITY

| RATE      | FEES   |
|-----------|--------|
| BASIC FEE | 355.00 |
| X\$ 9=    |        |
| X40=      |        |
| +135=     |        |
| TOTAL     |        |

| RATE      | FEES   |
|-----------|--------|
| BASIC FEE | 710.00 |
| X\$18=    |        |
| X80=      | 80     |
| +270=     |        |
| TOTAL     | 790    |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

3-26-04

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|------------------------------------|--------------------------|
| Total  | • 18                             | Minus                              | .. 20 = 0                |
| Independent                                    | • 4                              | Minus                              | .. 4 = 0                 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X40=             |                |
| +135=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X80=             |                |
| +270=            |                |
| TOTAL ADDIT. FEE |                |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|------------------------------------|--------------------------|
| Total  | •                                | Minus                              | .. =                     |
| Independent                                    | •                                | Minus                              | ... =                    |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X40=             |                |
| +135=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X80=             |                |
| +270=            |                |
| TOTAL ADDIT. FEE |                |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
|--|----------------------------------|------------------------------------|--------------------------|
| Total  | •                                | Minus                              | .. =                     |
| Independent                                    | •                                | Minus                              | ... =                    |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X40=             |                |
| +135=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X80=             |                |
| +270=            |                |
| TOTAL ADDIT. FEE |                |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- .. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- ... If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.